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ABSTRACT

This feature issue focuses on inclusive recreation for persons with developmental disabilities and their families. The articles provide information about the benefits of inclusive recreation for individuals and families, the challenges in attempting to create or access community recreation services that offer inclusive programs, and strategies that can be used by parents in seeking out and advocating for quality inclusive programs. The following major articles are included: "Inclusive Recreation and Families: Benefits, Challenges, and Parent-Professional Partnerships" (Linda A. Heyne and Stuart J. Schleien); "Benefits and Challenges of Recreation: Parent Perspectives" (Jennifer Mactavish); "Parents as Advocates for Inclusive Recreation" (Maurice K. Fahnestock and Linda A. Heyne); "Inclusive Recreation: A Parents' Guide to Quality" (Stuart J. Schleien and John E. Rynders); "The Role of Agencies in Supporting Belonging" (Angela Novak Amado); "Recreation Needs and Benefits Across the Life Span" (Carla E. S. Tabourne and Jerry G. Dickason); "Elders and Preschoolers Supporting Each Other: The Jewish Community Center Intergenerational Program" (Linda Heyne and others); "Improving Adapted Physical Education in Schools: A University-Public School Partnership" (Martin E. Block and Luke Kelly); "Recreation-Human Services Partnerships: The Rural Recreation Integration Project" (Lynn Anderson and others); "Community Recreation for Young Adults: Project TRAIL" (John Dattilo and others); "Supporting the Whole Person: Southside Services" (Don Magnuson); and "Building the Community Membership of Older Adults with Developmental Disabilities" (Barbara Ann Thomas). (DB)



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Feature Issue on Inclusive Recreation and Families

Volume 9 (4) Fall 1996



Inclusive recreation creates opportunities for young people with disabilities, such as Erin Burkhour (second from left) to develop lifelong leisure skills, share interests and activities with others, and strengthen self-esteem and confidence. See story below.

The Road to Inclusion: Erin's Story

by Cynthia Kay Burkhour

At the start of the 1992 school year, Erin was a very typical 12-year-old in seventh grade. She was an active, bright, athletic, busy girl who loved to dance and do gymnastics. On October 23, 1992, our lives changed forever. Erin experienced four massive strokes over the course of one day, leaving her with significant right hemiplegia and expressive aphasia. We spent two weeks in pediatric intensive care while Erin was monitored, evaluated, examined, and tested to no avail. No cause for the strokes was identified and eventually she was transferred to a rehabilitation hospital. We lived there until Christmas Eve.

After discharge, Erin continued in therapy full-time (six days per week) in the pediatric outpatient therapy/hospital school program until the fall of 1993, when she began re-entry part-time to her junior high school. Erin continues to recover and is receiving therapy services, including therapeutic recreation, at school. She has just completed her sophomore year of high school. She is learning to ride a bike, type one-handed on a computer, swim, talk on the phone, and dance again. We are working hard to adapt to the massive changes in our lives. Erin is working hard to

Erin, continued on page 22

From the Editors

Strategies and resources to support the inclusion of individuals with developmental disabilities in community recreation have been available for over 10 years. Yet, for many children, youth, and adults, participation in segregated programs remains their only option. The reasons are many. Among them is the reality that many parents have not been made aware of the positive experiences that await persons with disabilities through inclusive recreation. Many are also unaware that the key to successful participation is well-planned programming that enables participants with disabilities to acquire recreation and leisure skills in a manner that matches their interests and needs. And, many recreation service providers continue to lack adequate knowledge about disabilities and how to accommodate a range of ability levels within a program.

This issue of IMPACT focuses on inclusive recreation for persons with developmental disabilities and their families. These articles provide information about the benefits of inclusive recreation for individuals and families. the challenges in attempting to create or access community recreation services that offer inclusive programs, and strategies that can be used by parents in seeking out and advocating for quality inclusive programs for their sons and daughters who have developmental disabilities.

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A publication of the Institute on Community Integration (UAP) and the Research and Training Center on Residential Services and Commuity Living, College of Education and Human Development, University of Minnesota. Dedicated to improving community services and social upports for persons with disabilities and their families.

Inclusive Recreation and Families: Benefits, Challenges, and Parent-Professional Partnerships

by Linda A. Heyne and Stuart J. Schleien

For over a decade, families and professionals have been working together to create new ways to include children, youth, and young adults with disabilities in regular recreation activities in their communities. Inclusive recreation means that a young person with a disability can participate as fully as he or she is able in any community recreation activity that is available to a young person of a similar age who does not have a disability. Inclusive recreation may mean that a child is able to play in the backyard with other children from the neighborhood. It may mean that an adolescent can go to a movie with friends. Or it may mean that a young adult can enroll in a swimming class at a local community center. It implies more than physical access to community recreation, and even more than physical inclusion in recreation settings. Inclusive recreation means social inclusion, as well. If a person with a disability has no social interaction with other group members, then inclusion is not taking place.

Participating in everyday kinds of community recreation activities can have a tremendous impact on an individual's life. This article provides an overview of some of the benefits that children, youth, and young adults with disabilities and their family members can receive from participating in inclusive activities. It also describes some of the challenges they may face, and the roles that families and professionals can play as joint decision-makers in the process of providing inclusive recreation options.

■ Benefits for Individuals

Recreation is a major life skill area that is essential to human growth and development. Recreation provides opportunities for physical fitness, skill development, socialization, a balanced lifestyle, and overall maturation. Successfully engaging in such activities as acting in a play, jumping off a diving board, playing in Little League, learning a dance routine, paddling a canoe, or mastering a sequence of movements in martial arts gives participants personal memories and growth opportunities that have numerous beneficial outcomes, including the following:

- Expands lifelong leisure skills. Learning a variety of hobbies, games, outdoor adventure, sports, or creative arts can equip individuals with an extensive repertoire of activities from which to draw throughout their lives.
- Encourages socialization and friendship. One of the primary reasons people choose to participate in recreation activities is to meet people, get to know them, and make

friends. Recreation participation provides multiple opportunities to socialize and learn appropriate cooperative behaviors such as waiting in line, taking turns, sorting out problems, giving positive feedback, and working together as a team. Meeting friends in a recreation setting gives participants a place to call their own, a sense of belonging, ways to exchange experiences and feelings, and further opportunities to socialize with others.

- Builds physical fitness and strength. Participation in physical activity promotes overall physical health and fitness through the development of eye-hand coordination, fine and gross motor skills, agility, balance, muscular strength, and cardiovascular endurance.
- Develops life skills. Involvement in recreation activities builds important related life skills. For example, making purchases at a concession stand provides an opportunity to practice money management and communication skills.
 Dressing for a swimming class increases self-help skills.
 Learning to use public transportation to go to a community center reinforces mobility skills.
- Enhances personal growth and human development.
 Recreation has enormous potential to contribute to a young person's self-esteem and personal growth. Selecting recreation activities develops self-responsibility, initiative-taking, and choice-making skills. Taking part in activities on one's own encourages autonomy. Successful participation promotes self-confidence and satisfaction. Additionally, recreation activities offer opportunities to experience the joy of participating in life-affirming activities.

With this myriad of benefits from recreation participation, it is difficult to imagine a good quality of life without a repertoire of leisure skills. It is, therefore, critical to teach recreation skills to young people and encourage their participation in recreation activities.

■ Benefits for Families

Families also experience many rewards from inclusive recreation. When parents observe their children with disabilities involved in everyday recreation activities, they experience the satisfaction of watching them make friends with others and acquire new life skills. When siblings recognize the recreation skills and interests of a brother or sister with a disability, they may discover new activities that they can enjoy together. For families, the benefits include:



- Builds community supports. Meeting providers of inclusive community recreation services expands the community support network from which parents may draw.
- Provides respite for families. Inclusive recreation services provide parents with a respite from the ongoing responsibilities of raising children with significant needs.
- Promotes family cohesiveness. Inclusive community recreation creates a central location where all family members may participate in recreation activities.
- Empowers families. The provision of quality inclusive recreation services encourages family input in all aspects of the inclusion process. By making decisions jointly with recreation professionals, families can express their goals and opinions, provide helpful ideas about program implementation, and gain a sense of empowerment from seeing the positive outcomes that result from their input.
- Provides opportunities to meet other families. Participation in inclusive community recreation encourages families of young people with disabilities to become acquainted with other families. These connections can foster friendships and break down feelings of isolation.

As the preceding list demonstrates, successful inclusive recreation participation by children, youth, and young adults with disabilities extends its benefits to the entire family.

■ Challenges Families Face

Despite the numerous benefits of inclusive recreation, individuals with disabilities and their families continue to face many challenges when they attempt to access community recreation. Barriers to inclusive recreation include:

- Attitudinal challenges. Lack of information, negative attitudes, stereotypic thinking, and adherence to traditional models of segregated recreation services can limit opportunities for inclusion.
- Administrative challenges. Inexperience serving people
 with disabilities may create agency barriers to inclusion.
 Lack of trained staff, inaccessible facilities, insufficient
 funding, or uncertainty about how to provide transportation or insurance coverage can all discourage an agency
 from providing inclusive services.
- Architectural challenges. Physical barriers that prevent access to buildings, recreation facilities, or outdoor environments create obstacles to inclusion.
- Programmatic challenges. Program staff may lack appropriate curriculum materials, equipment, and training to competently and confidently serve participants with disabilities. Or programs may emphasize individual achievement or competition, which tends to place people with disabilities at a disadvantage.

Family constraints. Constraints that arise from family life
may make inclusion difficult. Competing family priorities
may prevent parents from devoting time to locating resources for inclusive recreation and assisting in the inclusion process. If no process for inclusion exists, parents
may feel they lack the skills and knowledge necessary to
advocate for inclusion.

Inclusive recreation is a process. It is through a partnership between parents and professionals that the above challenges are creatively and forcefully met, and the inclusion process yields the most beneficial outcomes.

■ Parent - Professional Partnerships

There are several ways that parents can promote and participate in the process of developing and offering inclusive recreation options. Probably the best way to change misconceptions and other attitudinal barriers is through educating recreation providers about people with disabilities. As the individuals who know their children best, parents can provide professionals with valuable information about participant needs, abilities, goals, preferences, interests, and learning styles. Parents can offer suggestions for meeting particular needs in the areas of communication, medication, behavior management, or physical positioning and handling within the context of programs. Parents can recommend solutions to problems that may arise during program participation, such as modifications in equipment, facilities, procedures or rules that would support full inclusion. Through maintaining ongoing communication with program staff, parents increase the likelihood that changes are made while their children may still benefit from them. When evaluating the overall success of the program, parents can provide insightful feedback, including feedback on ways to make parent involvement easier for families that are juggling competing interests, needs, and priorities.

The benefits of inclusive recreation do not occur by accident. The ongoing relationship and dialogue between parents and professionals are the keys to solving the challenges that inclusive recreation sometimes entails. Together, they can join their expertise, skills, resources, and determination to provide meaningful inclusive recreation experiences for young people with and without disabilities.

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Benefits and Challenges of Recreation: Parent Perspectives

by Jennifer Mactavish

"A family that plays together stays together" is a popular saying within the field of recreation. Supporting this saying, a number of studies involving families show that when a family takes part in activities it finds enjoyable, family relationships and overall quality of life are improved. Family recreation also is of special significance for children; it is within the family that most children are first exposed to recreation and the skills (social, physical, recreation) that influence their lifelong interest and participation. Providers of community recreation services – especially those interested in serving the needs of children with developmental disabilities – are just beginning to appreciate the importance of understanding family recreation patterns. Recognizing this importance, a study was recently completed in which parents from 65 families in the St. Paul/Minneapolis area shared their perspectives on family recreation and its impact on their lives and the lives of their children with and without developmental disabilities (Mactavish, 1994).

For the families who participated in this study, family recreation during the week usually involved small groups of family members, most often mothers and their children, in some form of activity (walking, riding bikes, playing) at home or in the surrounding community (often a park). On weekends, recreation often involved all members of the family in similar types of activities. Family recreation was almost exclusively informal (not organized by recreation service agencies) and family-initiated. Although not highly dissatisfied with this pattern, a number of families expressed interest in taking part in more formally organized recreation programs involving other families.

From the perspectives of parents in this study, participating in activities as a family was very important. Most commonly, family recreation was seen as a way of re-establishing a sense of fun and balance to everyday life. Building on this view, parents spoke at great length about the benefits of taking part in activities as a family. Most of the time these conversations centered on how family recreation made families closer, gave them something fun to do, and improved quality and satisfaction with family life. Illustrating the meaning of these outcomes, one parent noted: "Making and keeping love and compassion between all of us is a priority in this family. The time we spend together, the activities we do...helps us bond, in a fun way, as a family..."

While offering positive outcomes for the whole family, family recreation was described as being especially important for children – particularly those with developmental disabilities. For these children, family recreation was a key means of enhancing connections with other family members, developing skills (social, physical, recreation), and setting the foundation for future participation. In further explaining

the importance of these outcomes, parents noted that limited individual recreation options and concerns about the quality of programs left them feeling as though family recreation was the only opportunity their children with developmental disabilities had for meaningful recreation.

In discussing the things that made it difficult for families to take part in recreation together, most often noted were challenges in coordinating family members' schedules, finding activities that could accommodate wide ranges in age and skill, and the amount of pre-planning needed to take part in some activities. Additionally, one of the most common concerns revolved around the information parents received from recreation service agencies. Specifically, marketing and promotional materials (brochures, community recreation guides) often did not provide enough of the information needed to decide whether programs were appropriate and of interest for their families or for individual recreation for their children with disabilities. In explaining this frustration, one parent captured the sentiments of many others:

I'm always looking through the information that comes from parks, the Y... anywhere that might have a good program to offer. They all seem to have that generic statement, something about no one being excluded...yet I never find anything in it that makes me feel like they are really wanting me to call or to come....[I]t's just not all that inviting. So we eliminate a lot of things. We just don't go and do as much as we would like as a family and we sure don't send our son off to do things on his own.

In summary, families who have children with and without developmental disabilities view family recreation as a valuable and significant part of life. It helps strengthen family relationships and provides children with opportunities to learn lifelong recreation skills in supportive and nurturing environments. Because of experiences in family recreation, parents are very knowledgeable about what it takes to successfully include their children with disabilities in inclusive recreation. They are also knowledgeable about the challenges and barriers. It is this knowledge that equips parents to be advocates, to assist recreation service providers in offering family-centered programs that welcome all families.

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Reference: Mactavish, J. (1994). Recreation in families that include children with developmental disabilities: Nature, benefits and constraints. Unpublished doctoral dissertation. University of Minnesota.



Parents as Advocates for *Inclusive* Recreation

by Maurice K. Fahnestock and Linda A. Heyne

As parents advocate for and access inclusive recreation services for their children with developmental disabilities, there are different approaches they can take in working with service providers. This article explores two possible approaches. The first, which recognizes that families are the paying customers of an organization's services, seeks to build collaborative relationships between parents and professionals to support inclusion. The second approach, which is useful if an organization does not respond satisfactorily to a parent's initial request, incorporates organizational advocacy strategies.

■ Supporting Inclusion with Collaboration

The first approach to promoting inclusion is collaboration between parents and recreation service providers. This collaborative agenda begins with a parent or parents identifying goals and needs related to a child's participation in inclusive recreation, and then meeting with appropriate program staff to communicate those goals and needs. The agenda listed below can assist in this process:

- **Know your goals.** What are you and your child looking for (fun, friendships, learning)? What kinds of activities (active, passive, social) does your child enjoy?
- Identify and select programs that match your goals and your child's interests. What are the program's schedule, activities, and staffing? Is the quality of the program consistently high?
- Express clearly your goals for your child. Ask if your child's goals and interests can be met through the program.
- Describe your child's favorite activities at home, and the child's strengths and abilities as they relate to the program.
- Present your child's needs (medical, social, safety, communication, mobility) in relation to the program activities.
- Present your concerns about inclusion and/or the program. Ask how these concerns will be addressed.
- Share names and phone numbers of other professionals who have worked with your child, if additional information might be valuable.
- Set up times to check in and talk about how the program is going. If possible, communicate with someone who works directly in the program.

If a parent follows this approach and is not satisfied that the agency can provide adequate inclusion supports, then the parent can use the organizational advocacy approach.

■ Organizational Advocacy for Inclusion

Each level of an organization has its own roles and responsibilities for addressing the organization's direction, actions, and programmatic success. The goal of advocacy is to reach the staff members who have the power to make decisions about inclusion and to promote systems changes that support inclusion. Common organizational roles include:

- Board members and executive leaders. They work directly on organizational meaning and mission and set the direction for the organization's actions.
- Managers and supervisors. They work at the decisionmaking, policy implementation, and procedure levels.
- Front-line staff. They use the organizational structures and resources to carry out programs.

Understanding these roles and responsibilities and clarifying who has the power to make decisions enables the parent to prepare and launch the advocacy effort.

A parent should carefully identify the problem related to inclusion and initially request a solution at the lowest staff level where the problem is occurring. If a satisfactory response is not received, the parent should approach the staff person with the decision-making power at the next level above. At each level, a parent should clearly present the issues and ask the staff person if he or she has the authority to resolve them. If that person does not have the authority, the parent should ask who does, and then move the advocacy effort to that level. The parent should communicate at each level that he or she wants to work with the staff to support inclusion, and then proceed to the appropriate organizational level to submit the request.

■ Conclusion

The foundation of inclusion and community is welcoming and supportive relationships. These strategies seek to intentionally build positive and collaborative relationships between parents and professionals to improve the quality of recreation programs for everyone.

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Inclusive Recreation: A Parents' Guide to Quality

by Stuart J. Schleien and John E. Rynders

"How do we find community recreation programs that will make our child feel welcomed and really part of the group?" This is a question often asked by parents who have a child with a developmental disability. We believe it is important for parents to have a set of questions that they can ask to judge the quality of a community recreation program and its ability to fully include – to welcome, support, and involve – young people with and without disabilities. We have developed one such tool, basing it on our experiences in inclusive recreation over the past 14 years. It is a list of questions that evaluate the characteristics – what we call quality indicators – that reveal the level of commitment to inclusion that exists in a recreation program.

When evaluating a program's quality, we suggest that parents look at four general areas. First, parents should determine how committed the program administration is to inclusion by asking administrators questions related to policies and staffing, and reviewing written materials. Second, parents can tour the program and discuss, with both administrators and staff, logistical and environmental considerations in maintaining an inclusive program. During such a tour parents can also observe and ask questions about a third area, the techniques and methods used to support the inclusion of participants with disabilities within the program. And lastly, parents can observe program activities to see if they address individual needs and preferences. For each of these areas there are specific indicators of quality, and questions about their presence or absence will lead to an awareness of whether the fundamentals for inclusion are in place.

The quality indicators, framed as questions, can be asked not only by parents and care providers, but also by recreation professionals in examining and planning programs aimed at inclusion. The quality indicators provide a tool that can become a permanent part of a program's or organization's self-assessment process. As parents and professionals seek the same goal – quality programs that include young people with and without disabilities – these indicators can help them work as partners in a process that benefits everyone.

Quality Indicator #1: Administrative Policy and Practice

In evaluating the commitment of the program to fully including children with developmental disabilities in its recreation activities, the following questions may be asked regarding administrative policies and practices:

• Do the agency's mission statement and profile, as presented in brochures, advertising, and other public relations efforts, reflect a commitment to inclusion?

- Is documentation of previous and current inclusive services available? Are program descriptions and evaluations written clearly and do they reveal social inclusion?
- Are published policies and procedures in compliance with laws pertaining to serving persons with disabilities in settings that are as inclusive and least restrictive as possible?
- Are budget commitments sufficient to support inclusion efforts? Are funds available to adequately provide adaptations, one-to-one assistance, and other supports for those participants with disabilities who need them?
- Are the opinions of parents, advocacy groups, consumer review boards, decision-makers, and other inclusionoriented persons solicited by the agency? Do they collaborate in inclusion planning efforts, using focus groups and other means to help develop and maintain the integrity of the inclusive program?
- Are staff hired who have backgrounds reflecting individualized programming and experience in inclusion?
- Are generalists and disability specialists committed to the growth of each other's participants? Do their collaborative efforts clearly reflect this co-commitment?
- Are staff given supervision, opportunities for continuing education, and feedback regarding inclusive techniques and practices as part of regular program evaluation and staff support efforts?

It is critical that agency administrators support inclusion efforts if people are to be welcomed and supported in ongoing ways.

■ Quality Indicator #2: Logistical and Environmental Considerations

To examine the ways in which the program procedures, structure, and environment support inclusion, the following questions can be asked:

- Are participants enrolled in programs that are chronologically age-appropriate and that include participants with a range of abilities, including persons without disabilities?
- Do modifications for physical accessibility allow for adaptations for individuals with a variety of needs?
- Are efforts made to keep costs related to adaptations reasonable for the program and the participants?
- · Does scheduling reveal sensitivity to times and places that



promote accessibility for persons with disabilities, including access to public transportation?

• Are procedures in place to keep key planners and players in continued communication with each other?

A good deal of the work that goes into a successful inclusive recreation program occurs at the program planning stage, long before the participants have an opportunity to take part.

■ Quality Indicator #3: Techniques and Methods

Evaluation of the day-to-day operation of the program and what actually happens during the activities can be guided by the following questions:

- Does inclusive programming reflect proven strategies and techniques for successful inclusion? (For more information on strategies for successful inclusion such as partial participation, companionship training, and task adaptation parents may want to refer to the book *Community Recreation and People with Disabilities: Strategies for Inclusion (2nd Ed.)*, authored by S. Schleien, T. Ray, and R. Green and published by Paul H. Brookes Publishing Company, 800/638-3775).
- Are there ongoing modifications of activities and materials to accommodate needs of participants, and are the modifications reduced or eliminated when no longer needed?
- Does assessment of skills, experiences, and preferences of participants with disabilities occur as part of the program?
- Do program instructors structure program goals and tasks for cooperative participation?
- Is there an ongoing evaluation of program quality?
- Are staff well-trained in how to conduct the program and given adequate preparation, administrative support, and staff assistance?
- Is there a "welcoming" orientation for participants and families as they are introduced to inclusive programs and adaptive strategies? Are they invited to participate in activities and activity assessment and evaluation?

A child with special needs cannot simply be "dumped" into a recreation activity or program and experience success. Many strategies must be used for a successful inclusive program.

■ Quality Indicator #4: Individualized Programming

In assessing the degree to which the program is individualized to meet the unique needs of each participant, parents can ask the following questions:

- Are the activities based on the needs and preferences of participants?
- Are adaptations geared to the individual? Are they as simple as possible, designed to increase independence within the activity, oriented toward enhancing mastery of recreation and social skills, and planned to be slowly withdrawn when no longer needed?
- Do activities develop skills, leisure knowledge, attitudes, and an awareness of resources that may be used in other settings by the participants?
- Are allowances made for personal challenge and dignity of risk? That is, does the child have an opportunity to experience aspects of an activity or program that may involve a bit of risk or challenge – either physical, cognitive or social – for the child?
- Do activities offer a range of recreation choices, from spectator participation to interactive types of activities?
- Do policies and procedures offer methods to positively and quickly address situations in which participant misunderstanding, behavior, or some other circumstance threatens to disrupt the program or place participants at risk?

Finally, it is necessary to ensure the individualized nature of the program to meet the varied needs of all participants.

■ Future Directions

The inclusion of young people with developmental disabilities in community recreation programs is an essential element in recognizing the inherent dignity of every member of our society. Successful social inclusion requires that major stakeholders of the service delivery system adopt a philosophy and value system that reflects the right of every individual to participate. Of central importance is the recognition that all individuals have a valuable contribution to make to their community. Parents should not be shy about getting involved, realizing that the pressure generated by informed parents and advocates not only gives the system a "push" in an essential way, but supports officials of the system in fulfilling their mission as service providers to the entire community. It is time for all of us to act together in helping make a true commitment to all of our communities' citizens. It is time to welcome everyone in community recreation.

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The Role of Agencies in Supporting Belonging

by Angela Novak Amado

Many people with developmental disabilities have been cut off from other members of their communities. Years of institutionalization, segregated schools and classrooms, segregated group homes, and sheltered workshops have resulted in two "parallel universes" for persons with and without disabilities. Maps of the social networks of people with developmental disabilities typically show only three groups consistently in their lives: paid staff, others with disabilities, and family (and many individuals lack family involvement).

Efforts are underway across the country to promote more typical social relationships and full community belonging for persons with developmental disabilities. Many "community building" projects exist that focus on building relationships between persons with and without disabilities, including supporting out-of-school relationships for children, relationships with coworkers in community workplaces, membership in community associations and clubs, and inclusive leisure programs that focus primarily on friendship rather than activity. In Minnesota during the past seven years, the Human Services Research and Development Center has coordinated several projects with residential and vocational agencies focusing on altering the roles of those agencies in providing support services, including recreation services. The goal has been to shift how agencies interact with those whom they serve, moving from protecting, caregiving or training to supporting people in friendships, relationships, and community membership.

In working with agencies over time, we have seen the necessity for service providers to embrace new attitudes, policies, and practices that support community inclusion. We have identified four principles that form the foundation of such changes:

- Relationships are primary. For all of us, the status of our relationships affects our health, happiness, and will to live. Sometimes the service system seems to be based on an assumption that people with disabilities are different from those without disabilities that for persons with disabilities, the more skills they learn or programs they pass the more satisfying their lives will be. The truth is that for all of us the main ingredient of happiness and satisfaction is how much love we have in our lives.
- The role of staff must be as community connectors. A complex system of regulation and professional education is currently invested in assuring that an adequate level of physical care is provided for persons with developmental disabilities and that they receive skill training for greater independence. Both of these thrusts result in isolation for people who receive services, and keep our communities deprived of the many gifts that people with disabilities

- have to offer. To promote community inclusion, agencies must redefine the role of staff to be that of "community connectors," a role that may include introducing persons with disabilities to nondisabled community members, assisting people in joining community associations and clubs, and providing ongoing support in deepening relationships between persons with and without disabilities.
- Inclusion means relationships. While many people with developmental disabilities who receive services have community inclusion goals as part of their service plans, most of the time inclusion looks like activities: shopping, touring zoos, going to the fair, and so on. Sometimes, it seems to mean putting everyone in the van and going to the drive-through at a fast food restaurant. Agencies and staff must shift their understanding of inclusion to define it as relationships with people, not just doing things or visiting places. It means shifting from "the community" as a place (anywhere outside the front door of the facility), to "community" as an experience, a sense of belonging.
- People have to be asked to be a friend. Often, community members are open to getting to know individuals with disabilities, to befriend them, to be members of clubs and groups with them. But, quite often those connections don't take place because members of community groups aren't directly asked to participate in creating friendship connections for persons with disabilities. People need to be asked as individuals for instance, a member of a club or group given a chance to meet one person with a disability who has similar interests or a compatible personality. In addition, there is typically a need for continued provider support for that relationship, at least until the individuals really get to know each other. Support may include providing rides, discussing concerns, and encouraging opportunities to deepen the relationship.

When agencies, including recreation service providers, embrace these principles, they become more focused on supporting the community inclusion of persons with developmental disabilities. As families seek to support, promote, and advocate for the inclusion of their members in activities and programs, these principles can provide a framework for collaborating with service providers. And parents may find that these principles strengthen their own determination and focus in continuing to support the growth of relationships outside the family for their children with disabilities.

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Recreation Needs and Benefits Across the Life Span

by Carla E.S. Tabourne and Jerry G. Dickason

Sometimes proverbs are confirmed over and over again, such as, "You can't see what's under your nose" (meaning that which ought to be obvious, is not). And so it is regarding the vital role of recreation, leisure, and play in our lives. We often dismiss as frivolous their important function in human development. We readily acknowledge the value of play for infants and children, but we fail to recognize its value for adults. Often it is only when we lack opportunities to experience the quiet inner calm of leisure, when our freedom to participate in recreation activities is constrained, or when our ability to acquire, perfect, and maintain non-job skills is thwarted that we understand just how important recreation, leisure, and play really are across the life span. They are the ingredients of a life with meaning for all people at all ages.

In ensuring that satisfying recreation activities are part of life at every stage, it is important to understand the interests, abilities, and needs of individuals as well as to have a broader grasp of how recreation may fit into and provide benefits for life at different ages. The following sections of this article highlight some of the unique considerations related to recreation, leisure, and play across the adult life span, beginning with the transitional years between childhood and adulthood.

Adolescence

Adolescence is a period of rapid physical and psychosocial changes. During adolescence, young people explore and take somewhat calculated risks, trying on adult roles for fit and comfort. They begin to define, plan, and act out who and what they want to be in the future. As teens mature they can begin to truly understand the meaning of leisure – during which they may work very hard to develop skills – in contrast with the work (i.e. effort) required at a job.

Appropriate recreation activities take into account the needs of teens to be accepted by their peers, explore relationships with peers of both genders, and experience some independent decision-making. Planning and participating in parties or going to movies with small groups of acquaintances are two common adolescent activities in which teens with developmental disabilities can easily participate. It is especially important that teens with disabilities be in central positions with controlled responsibilities, positions on which peers without disabilities rely, thus shifting the focus away from the "dis-" to the "ability." An example is filling the role of contact person for small group social activities, being the one with information about when and where to meet.

Early Adulthood

In early adulthood (the late teens and 20s), individuals

learn to take greater responsibility for themselves, define their own beliefs and values, and evaluate their influence on larger society. It is expected that young adults will pursue independent choices in work and non-work activities. When sharing common interests in recreation choices, significant relationships with others often emerge and are nurtured.

Typical leisure pursuits at this age center around career and serious relationships. Young adults with developmental disabilities need to establish with their families concrete plans for their future. These plans include decisions concerning job, personal relationships, living arrangements, medical decisions, and use of leisure time. Families and organizations must introduce and reinforce independence, decision-making, social, and other skills in many settings frequented by young adults. Recreation activities such as camping, outdoor adventure, and board and "parlor" games (e.g., Clue and Charades) provide wonderful opportunities to do this, as well as to develop and strengthen personal relationships and job-related skills, interests, and connections.

■ Middle Adulthood

The years of the 30s to 50s are characterized by redefining oneself. People typically attempt to balance individual needs with the needs of those for whom they are responsible. It is a time to define what constitutes leisure and the value of its role in life. Activities are often chosen because they can be enjoyed with significant others. Sometimes activities are selected because they can be played independently as part of personal leisure and may be woven into one's job.

Gardening is but one example of a leisure activity that can be enjoyed as an individual or group experience in middle adulthood. Besides the obvious benefits to small and gross motor skills, gardening encourages creativity, problem solving, and awareness of and responsibility for other living things. Associated with gardening is flower arranging, wreath making, and a host of other activities that have no defined criteria for success, and where the effort itself is as appreciated, as is the final product.

Travel, another common activity at this stage of life, offers opportunities for persons with disabilities to broaden their view of the world and of the variety of peoples in it. The travel industry is responsible for making reasonable accommodations. However, there are travel agencies that specialize in facilitating travel by individuals with disabilities, and by families and friends who wish to travel together. Such agencies can assist customers with preparations necessary for safe and comfortable trips.

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Elders and Preschoolers Supporting Each Other: The JCC Intergenerational Program

by Linda Heyne, Chad Storley, Carol Rone, Barbie Levine, and Dori Denelle

In her book, *The Fountain of Age*, Betty Friedan writes, "I have discovered that there is a crucial difference between society's image of older people and 'us' as we know and feel ourselves to be." As darkness is often described as the absence of light – and as disability has traditionally been defined as a lack of certain abilities – Friedan notes that "age is assessed not by what it is but by what it is not." Viewing aging as a problem distracts us, she believes, from facing "the real problems that keep us from evolving and leading continually useful, vital, and productive lives."

The elders who participate in the Intergenerational Inclusive Preschool Program at the Jewish Community Center of the Greater St. Paul Area (JCC) live in ways that model the fruitful, meaningful lives of which Friedan writes. Each elder is matched with a child with a disability in an inclusive preschool classroom, with the charge of assisting the child with a disability, as well as all the children. Elders volunteer for a variety of personal reasons: they miss their own grand-children who live elsewhere, they want to do something meaningful after retirement, they miss the social contact their work had provided, they need a challenge, or they wish to perform a *mitzvah*, or "worthy deed," for their community. The acts of loving kindness, or *chesed ve'emet*, the elders offer yield many benefits for the children and, reciprocally, for themselves.

The Intergenerational Inclusive Preschool Program began in 1994 as a joint effort between the JCC and the University of Minnesota's Research and Training Center on Residential Services and Community Living. Several factors combined to create this program. JCC staff members had served children and youth with disabilities in inclusive recreation programs for over 10 years and wanted to include additional children in the preschool on a regular basis. As an agency that serves all age groups, JCC staff believed that programming in both an inclusive way and an intergenerational way would benefit the preschoolers as well as the elder volunteers. At the same time, faculty at the university were interested in studying how to promote appropriate play and social behaviors of young children with disabilities within inclusive settings. They wanted to explore how seniors could be involved in the inclusion process and how they might benefit from participating in inclusive preschool classrooms. By joining these compatible interests, the collaborative program was initiated.

Enrollment in the JCC inclusive preschool is open to any parent who has a child with any type of disability, ages three through five. A family-child intake procedure, led jointly by the Special Needs Director and the Child Care Services Director, addresses family goals and needs, the child's abilities in several areas of early childhood development (language, motor skills, attention skills, play skills), and other information parents believe is important to provide.

Elders are recruited to volunteer in classrooms through a variety of outreach methods – flyers, mailings, newsletter articles, personal invitations from the Senior Adult Supervisor, and word-of-mouth. Before working in classrooms, elders receive one-to-one training that covers the children's individual needs and suggestions from parents and teachers on how to meet those needs. Elders also participate in workshops to learn about the preschool policies and procedures, and how to facilitate inclusion.

In the classrooms, the elders fill a variety of roles. They develop personal, consistent relationships with all of the children. When children need extra assistance to learn to use a toy or game, interact with others, join a play group, wash their hands, or zip their jackets, elders are there to help them. They read the children stories, remind them to wait their turn, step in when children are off-task or misbehave, and praise their accomplishments. Elders also serve as mentors for the children, sharing their life experiences and modeling positive ways that older adults contribute to communities.

Preschool teachers are grateful for the extra pair of hands that elders provide in classrooms. Children whose needs might otherwise be overlooked are met by the elder's watchful attention. Teachers also enjoy seeing the special dynamic that often occurs when "Grandpa Sid" or "Grandma Ida" enters the room. The children run up to them, greet them by name, and give them hugs. Elders, too, experience many benefits from their interactions with the children. They feel they are doing something productive, something that helps other people. Working with small children boosts their self-esteem and "keeps them young."

Parents appreciate the elders' involvement in their children's lives. They are comforted by knowing there is someone in the classroom who is devoted to giving their children the individual attention they sometimes need. As one parent says, "Elders have just everything to contribute – the mentorship, the life experience, their wealth of knowledge and patience after having been through so much over the years. Kids don't have much experience with elders. I think it's a vital connection that has been lost in society today. I think it's real important to develop those relationships ... and that extended family network."

Collaborative programs such as the Intergenerational Inclusive Preschool Program are an important and often overlooked resource that provides support for the inclusion



of young children with disabilities and their families. Such programs also prevent the disenfranchisement of our elders and encourage valuable links between generations.

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Reference: Friedan, B. (1993). *The fountain of age.* New York: Simon and Schuster.



Maggie and Ida

Maggie Erickson, a preschool student, and Ida Singer, an 87-year-old elder who volunteers in the Intergenerational Inclusive Preschool Program, have become important parts of each others' lives. Just how important can be seen in the following excerpts from conversations with Cathy Erickson, who is Maggie's mother, and with Ida.

Maggie's mother says: My daughter, Maggie, attends the JCC preschool for two days each week. Ida comes in every morning that Maggie is at school to help her. During the evenings, Maggie and I talk about everyone at the JCC preschool and Maggie always speaks of Ida with fondness. Like any child, Maggie is sometimes slow about getting ready to go to school. When that happens, I remind her, "You will get to see Ida today!" and before I know it she is out the door. Last year, Maggie had to have a cast put on her leg and she needed to stay home from school. She was thrilled when Ida made a special trip to visit her at our home.

Elders such as Ida provide love and acceptance to the children with disabilities and their classmates, and the children provide the same to the elders. Elders also contribute a wealth of life experience to the children and to the classroom curriculum. Too often families who have children with disabilities tend to become isolated. It is

nice to know that there is another adult in Maggie's life who can provide her with support and acceptance.

"Grandma" Ida says: I have always had a very wonderful feeling about grandparents. I never knew my own grandparents, but I've always thought they are very special—you can learn from them. I'm a different kind of grandma for the preschool children. Their grandmas are all young—busy and socializing. I'm the spoiling grandma.

When Maggie first came to the preschool she used to play mostly by herself, with the dolls. At first she really needed me there. I tried not to hover over her or "smother" her with attention. I'm sure it is easy to do that, but I thought if I gave her too much attention, she couldn't grow. So I try to take a back seat. I keep an eye on what Maggie is doing, in case she needs my help, but also interact with all of the kids. Now Maggie is mixing well with the children. She is benefiting on her own because she is doing a lot on her own. She likes everybody.

I never realized that three-year-olds were so smart. You can carry on a conversation with a child and learn a lot from them. For instance, even though I have a disability – I walk with a cane – the children learn to handle it. They realize that I can't pick them up readily. They learn that people have limitations. Like with my glasses. They would ask, "Why do you have to wear glasses, Ida?" They said, "Take them off!" I took them off and asked, "So how do I look?" "You still look like a grandma!" It keeps me young – keeps me younger – knowing that the children accept me for who I am.

I think it is important to get the different generations together. I think it is beneficial to the kids to have an overall picture of what people are – of what older people are, of what younger people are, of the different ways there are to live. If kids see an older person who can help themselves, it leaves an impression.

Working with the children makes a difference in how I feel about myself. I feel capable. It gives me a challenge, something to look forward to. If the children respond to something I do or say, then I feel good. I have a good feeling when I leave the classroom.

Contributed by Linda Heyne. Cathy and Maggie Erickson and Ida Singer live in St. Paul, Minnesota.



Improving Adapted Physical Education in Schools: A University – Public School Partnership

by Martin E. Block and Luke Kelly

While most children with developmental disabilities are included in regular physical education, many regular physical educators do not have the training or experience needed to work with them. The result often is limited, inappropriate, and even dangerous physical education experiences. To improve the quality of inclusive physical education for students with disabilities, it is necessary to improve the training re-

ceived by physical education professionals. This involves providing inservice and preservice training to physical educators that addresses how to work with students who have disabilities within the regular physical education environment. The University

of Virginia/Albemarle County Cooperative Adapted Physical Education Project has successfully used such an approach.

While most children with developmental disabilities are included in regular physical education, many regular physical educators do not have the training or experience needed to work with them.

master's level adapted physical education students and one doctoral level supervisor per year. The county special education staff continues to determine which schools have the greatest need for adapted physical education.

One of the unique aspects of this program is the type of training received by graduate students and the support provided to Albemarle County physical education staff.

Typically, graduate programs in adapted physical education follow a model in which graduate students work with young people with disabilities in weekly on-campus recreation and sports programs and six- to ten-week internships in local schools. While students in

these programs work with and learn about individuals with disabilities, the brevity of these on-campus programs and school internships does not provide students the opportunity to really know the children with whom they are working, learn how to develop a year-long physical education program, participate as a member of a school's staff or interact and work with parents.

In contrast, graduate students in the project are placed in an Albemarle County School for an entire year. They are viewed as staff members at their school and participate in staff meetings, individualized education plan (IEP) meetings, Parent Teacher Organization meetings, field trips, and other school activities. As staff members they have easier access to student information and to specialists such as physical and occupational therapists. Perhaps the greatest advantage of this model is that graduate students really get to know the children with disabilities in their school. Parents often comment that our students know their child almost as well as they do. Upon graduation from the project, students report that they feel extremely well-prepared to work as team members in schools, to provide physical education services to students with and without disabilities, and to work with parents.

Another important advantage of placing graduate students in schools for an entire year is that they can provide more support to regular physical education staff. Graduate students help regular physical education staff gain skills and knowledge needed to better serve students with disabilities in physical education by assisting regular physical education staff in: (a) determining which students qualify for adapted physical education services, (b) developing goals and objectives for physical education as part of the IEP process, (c) developing and then implementing comprehensive prescrip-

■ The Project's Goals and Activities

In 1992, Albemarle County (Virginia) Public Schools approved the county's participation in a four-year, federally funded project with the University of Virginia's Curry School of Education. The purpose of the project was to (1) address the physical education needs of preschool and elementary students with disabilities in Albemarle County Schools, (2) increase the ability of regular physical educators to accommodate the needs of students with disabilities, and (3) produce high quality regular and adapted physical education specialists. During each year of the project, the Curry School provided five graduate students who served as halftime adapted physical education specialists in elementary schools selected by Albemarle County Special Education staff. In addition, the Curry School provided a faculty member and a doctoral student to train and supervise the graduate students and to consult with regular physical education staff.

From 1992 to 1996, this project provided direct and consultative adapted physical education services to over 130 children with disabilities in 14 different Albemarle County schools. In addition, 19 master's level students have graduated from the University of Virginia with degrees in adapted physical education, and 17 are currently employed as regular or adapted physical education specialists in Virginia and several other states. When federal funding for the project ended in the summer of 1996, the Albemarle County School Board approved continued funding of the project through its own resources. This funding pays for tuition and fees for five



tive unit and lesson plans to help students with disabilities reach targeted goals, (d) utilizing new curricular models and instructional techniques, (e) collecting ongoing data and reporting on progress to parents and other team members on a regular basis, and (f) participating in IEP and other team meetings and communicating on a regular basis with each student's parents and team members. In some cases, training is so effective that regular physical education staff no longer require assistance from the project.

■ Project Success Stories

While graduate students and regular physical education staff gain a great deal through participation in this project, the biggest winners are children with disabilities and their parents. Two success stories are those of Phillip and Blair.

Philip is a 13-year-old boy who has autism. He communicates by using sign language and gestures, pointing to letters and words, and touching pictures. Philip was a fifth grader when Brian, one of the project's graduate students, first met and worked with him. Brian did many activities with Philip including supporting the regular physical education teacher when Philip went to regular physical education. Brian also worked with Philip and some of his classmates on unique physical education activities. One particular activity that Philip learned to enjoy with Brian was hiking. The effect on Philip of receiving support for participation in inclusive physical education is described by his mother in the following story:

Philip had Brian for adapted physical education, and Brian did some really neat things with Philip. He actually taught Philip, well I don't want to say taught him a hiking program, but there was a hiking unit, and Philip really enjoyed it a lot. And now hiking is part of his life. There was a parents' day at the end of the hiking unit, and basically, all the parents of the students that Brian worked with got to go on a hike in the back of the school. Brian showed us how he taught the children, how he got them to stay on the path, what not to do, what not to eat, etc. And then we left the school and went for a hike at the Ivy Creek Natural Area. That was really fun, and Philip was kind of a leader of everybody. It was really interesting watching Philip, because he is the kind of child who has no fear of danger and tends to run away. Yet, he was leading the group, and I could see how that impacted on his self-esteem. It really was neat to see! He's got a real keen sense of direction, which I think I really learned about because of this hiking program. Hiking is still something he enjoys today, and we go hiking together whenever possible.

Another young person who has benefited from the support of a student in the project was Blair. Blair is a second grader at Broadus Wood Elementary School. He has autism and limited language, but he is starting to use words to

communicate. Blair first participated in the project as a preschooler who was in a self-contained preschool class for children with disabilities at a different school. When the physical education staff at his current school learned that Blair would be coming, they were very nervous. They were not sure how they would be able to accommodate him in regular physical education. However, Jason, a graduate student from the project, worked with Blair one-to-one, supported him in regular physical education, and provided information and support to the regular physical education staff. Because of the extra support provided to Blair and to the physical education without any special support. His mother recalls some of the ways in which Blair benefited from the support of project staff:

Jason worked with Blair when he first came to Broadus Wood Elementary School. Jason did a great job helping transition Blair into his new surroundings, and he developed an individual physical education plan that included a great deal of my input. For example, I really wanted Blair to learn how to ride a bicycle, and Jason worked with Blair nearly every day until he mastered this skill. Jason also did a lot of work with the regular physical education staff to help them work more effectively with Blair in general physical education. I know that Blair can now participate in regular physical education without any special assistance, and that is due in large part to Jason's early support and training to the regular physical educators. Jason really developed a nice relationship with Blair, and he was able to get Blair to do things that no one else in the school could get him to do. In fact, Jason helped other members of Blair's education team realize that Blair had a lot more potential than they thought. For example, Jason showed team members that Blair could be trusted to walk down the hallways of the school without holding a teacher's hand.

Children with disabilities, who often received inadequate physical education prior to this project, now receive an individualized physical education program. In addition, modifications to instruction, equipment, and game rules allow these children to be better accommodated in general physical education. Parents learn about the importance of physical education, their suggestions and concerns are carefully considered, and they receive regular feedback about their child's progress. Reactions of parents to the project have been very positive. In fact, one parent recently noted that because of the project, physical education is the one area of her son's education that she does not have to worry about.

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Recreation – Human Services Partnerships: The Rural Recreation Integration Project

by Lynn Anderson, Carla Brown, and Patricia Soli

Recreation and leisure are essential in a person's life. This is true whether you are short or tall, young or old, with or without a disability. Recreation is what often draws us into friendships, involves us in our communities, and increases our health and quality of life. However, residing in a community does not necessarily ensure inclusion in its recreation network.

In North Dakota, people with disabilities now reside primarily in local communities, both large and small. This was not always the case. Less than 15 years ago, many people with disabilities lived in institutional settings such as state schools and state hospitals. Following a 1981 lawsuit brought forward by the Arc of North Dakota, large numbers of people with disabilities were "placed" in a variety of less restrictive living environments throughout the state. Through the work of the human service system, communities may have been physically prepared to accept individuals with disabilities by meeting their housing and vocational needs. However, they were not adequately prepared to socially include individuals with disabilities in their communities by meeting their recreation and leisure needs. The recreation/ leisure service system, which traditionally provides recreation services to communities, had not been prepared to include people with disabilities in the services it provides. Whether park and recreation departments, YMCA's and YWCA's, sports leagues, church camps, or Girl Scout troops, there was a need in our state to increase the level of awareness and the skills of recreation service providers to be able to include people with disabilities.

In addition, there was limited communication between the human service and leisure service delivery systems. Professionals working in the human service system have expertise in the concerns of people with disabilities and are highly aware of their leisure and social needs, and barriers that people with disabilities encounter. Leisure service providers, on the other hand, have the facilities, resources, and expertise in recreation programming, but often lack awareness of the needs of people with disabilities living in their communities or how to meet those needs.

The Rural Recreation Integration Project (RRIP), a collaborative effort between the North Dakota Parks and Recreation Department and the University of North Dakota, has challenged itself to bridge the gap between these two service delivery systems. Its intent is to develop and help sustain naturally occurring networks where resources and expertise could be shared to most effectively meet the recreation needs of people with disabilities in their communities.

The purpose of the project is to facilitate the physical and social inclusion of people with disabilities into existing community recreation and leisure programs and services.

The two primary activities of the RRIP are training and technical assistance. Certified therapeutic recreation specialists have provided training and technical assistance to aid in the development of skills, knowledge, and networks of leisure service providers and human service providers in North Dakota as they work to include people with disabilities. Intensive training was conducted over a three-year period to over 250 people who work in a variety of professional areas in parks and recreation and in human services. Participants in the training included people with disabilities and their family members, park directors, social workers, recreation specialists, group home managers, youth directors, Girl Scout staff, and advocacy groups, just to name a few. The training was conducted over a two-month period each year. Because North Dakota is a large, sparsely populated state, we used the North Dakota Interactive Video Network to conduct the training. Through a series of classrooms connected by video technology across the state, people were able to attend the training in or very near their home community. The training focused on disability awareness, physical and program accessibility, and implementation of inclusion in park and recreation programs. During the training, participants formed partnerships composed of a human service provider and a leisure service provider. Examples of partnerships included the following:

- A Girl Scout council and an Arc chapter.
- A city park and recreation district and a group home system.
- · A state park and a disability advocacy group.
- YMCA youth sports leagues and a special recreation center.
- A park district summer playground program and a parent advocacy group.
- A gymnastics club and a school district adaptive physical education program.

Together, the partners worked to include at least three people with disabilities in recreation programs. Assignments were completed during the training, but much of the work of implementing inclusion occurred after the training concluded.

Rural, continued on page 23



The Doors Are Opening: Mary Jo's Story

As I drove up to the school door, Mary Jo said, "I go by myself; you stay here!" I inquired. "Do you remember where the meeting room is?" to which she replied an emphatic "YES!" So I remained in the car as my vivacious, dark haired, dark eyed. 11-year-old daughter, who

happens to have Down syndrome. bounded out of the car and closed the door. As she was getting out of the car, three of her fellow Girl Scout troop members were getting out of their cars and coming toward the school door. I heard, "Hi, Mary Jo", "I like your new glasses." I watched as they all walked in together and headed to the junior Girl Scout meeting.

Every parent wants his or her child to be involved and socially accepted. Those of us who parent children with disabilities want this for our children as much. if not more, than parents of children without disabilities. Sometimes, for our children, it doesn't come easily. When Mary Jo first joined a

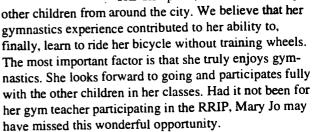
Brownie troop, she was fortunate to have a troop leader who was very matter-of-fact and accepting of the fact that Mary Jo had Down syndrome. Mary Jo truly loved being a part of a Brownie troop, so when she was too old for Brownies, she "flew up" to junior Girl Scouts. There was not a troop at her grade level in her neighborhood school where she is fully included in a regular classroom, so she was assigned to a troop in a neighboring school. The leaders were accepting of her; however, at times, they seemed a bit tentative about dealing with her. Then one evening, a member of the Rural Recreation Integration Project (RRIP) spoke to all of the Girl Scout leaders. The next day, that leader told me about what they had heard and how helpful the information she provided had been to them. Both leaders now actively find ways to make sure that Mary Jo is fully included in all activities of the troop and seem much more comfortable with her. This is important, I believe, as the girls in the troop will take their cues from the leaders. If the leaders model acceptance and ways of including Mary Jo, the girls will learn from them and act accordingly.

The girls seem to accept Mary Jo as a member of the troop. They always greet her, include her in games and activities, and assist her when she needs (and will accept) help. Mary Jo truly enjoys being a part of the Girl Scout troop. She always remembers the meetings and is excited

about going. She is learning to interact socially with children outside of her own school, is learning the discipline provided in the Girl Scout program, and is learning all kinds of other things from speakers and activities.

One evening last year, we received a call from Mary

Jo's gym teacher at her school. The teacher said that they were just finishing a unit on gymnastics and she noticed that Mary Jo had really enjoyed it and seemed to do quite well, given her gross motor delays. She suggested that we consider enrolling her in a gymnastics club to continue with gymnastics. She met us at the gymnastics club and introduced us to the coordinator. They explained that they both had been taking classes provided by the RRIP and were looking for children with disabilities to enroll in gymnastics. Mary Jo has been involved in gymnastics continuously ever since. She has made gains in motor ability, balance, coordination, and self-discipline, and has met many



There is no question in our minds that the RRIP has had a positive impact on Mary Jo's life. Although she has Down syndrome, she has goals and dreams just like other children. Her goals include living as independently as possible in this community and doing all the things that other people do, like working, having friends, and having fun. The relationships she is forming and the relationship skills she is learning through recreational activities are very precious and important to her and to us. We know we will not always be around to advocate for her. Her friends and the community will have to help with that by having inclusion as an integral part of life. The RRIP has enhanced that process, and in some cases, begun that process. The doors are opening and Mary Jo wants to go through them with her friends.

Contributed by Virginia Esslinger, Mary Jo's mother. The family lives in Grand Forks. North Dakota.



Community Recreation for Young Adults: Project TRAIL

by John Dattilo, Katie Bemisderfer, and Richard Williams

How do you facilitate the transition of high school students with development disabilities into community leisure participation? How do young adults benefit from learning about leisure appreciation, self-determination, friendship, and the leisure resources available in their communities? These are two of the questions addressed by Project TRAIL (Transition Through Recreation and Integration for Life), a three-year federally-funded research project at the University of Georgia that began in 1992.

During its three years of existence, Project TRAIL used leisure education to facilitate the transition of young adults with developmental disabilities into community leisure participation. The project had three primary goals. The first was to collect information on the leisure patterns, behaviors, and constraints of young adults with developmental disabilities. The second was development and implementation of a comprehensive leisure education program for young adults with developmental disabilities. The third goal was to determine the impact of the leisure education program on the lives of the participants.

The leisure education program was conducted in three northeast Georgia high schools. Nineteen students with mild to moderate mental retardation participated in a four-part leisure education program that included an 18-week leisure education course, leisure coaching, family and friends workshop, and follow-up services. The leisure education course included five units of study: leisure appreciation, social interaction and friendship, leisure resources, self-determination, and decision-making. Daily lessons provided a variety of learning and experiential activities. Board games were used as teaching tools to enable participants to achieve specific objectives such as learning about community leisure resources, social interaction or decision making.

In addition to the classroom experiences, each participant was assigned a leisure coach who provided assistance during activities in inclusive community recreation settings. The community activities and support of the leisure coaches allowed participants to practice the skills they learned in the classroom. The participants identified their leisure interests and the leisure coaches were available to help participants follow through with those choices. The leisure coaches established working relationships with leisure service providers in the community. Once project participants were involved on a regular basis in an activity, the leisure coaches slowly withdrew their assistance, and community leisure service providers offered support if needed.

Another important component of the leisure education program was the involvement of family and friends. Family workshops were conducted to solicit the support of family and friends and to provide them with the resources to encourage the young adults to actively participate in community leisure activities. In addition, the leisure coaches developed a rapport with family members and friends. At least twice a month coaches met with family members to discuss each participant's progress in independently accessing leisure activities in the community. Leisure coaches provided resources to family members regarding recreation opportunities, and discussed barriers to leisure participation such as transportation, money or inaccessible facilities.

The final component of the leisure education program was the follow-up phase. As the leisure coaches withdrew their on-site support of participants, telephone contact and occasional visits were made by coaches to family members and to the community leisure service providers. The calls were designed to encourage the continued successful participation by the young adults in community leisure activities.

Through Project TRAIL, transition-age young adults gained knowledge of leisure options, experienced high levels of enjoyment during community leisure education, and moved toward ongoing participation in community leisure activities. Before the leisure education course began, participants were tested to determine their knowledge in the areas of leisure appreciation, social interaction and friendship, leisure resources, self-determination, and decisionmaking. Low scores (usually fewer than half correct) indicated that the participants had little previous knowledge in these areas; following the leisure education component of the program, participants, on the average, correctly responded to 80% of the questions. While participating in the leisure education class, each person made plans to take part in several (usually five) activities such as youth bowling leagues, youth choir, tennis, volunteer work, pen pal correspondence, and movies. Participants attempted approximately 80% of their planned activities and continued to participate in over half of their planned activities during the follow-up phase of the project. Project TRAIL demonstrated that if individuals with developmental disabilities have the opportunities to engage in leisure education and to learn skills - and if they are supported and encouraged by leisure coaches, family members, and friends - they can experience successful participation in community recreation activities.

Families may want to use some of the program's strategies to support the leisure activities of their young adults with disabilities. For instance, a family member can act as a leisure coach and assist the individual in finding a leisure pursuit of his or her choosing. The family member can provide limited assistance during the leisure activity and reduce the assistance as the person becomes more independent. Realizing the time constraints often experienced by family members, asking a friend or finding a community volunteer



to act as a leisure coach could be helpful. Another possibility is that family members can request that a structured leisure education program be offered at the young adult's high school or a local park and recreation center. This leisure education program could be designed to provide participants with the skills needed to actively participate in community leisure experiences. Through purusing these

options, families can encourage expanded leisure options and satisfaction for young people as they make the transition from high school to adult community living.

John Dattilo is Professor, Katie Bemisderfer is Instructor, and Richard Williams is a doctoral student in Recreation and Leisure Studies, The University of Georgia, Athens, Georgia. They may be reached at 706/542-5064.



Kyle (right) and Richard share their mutual interest in art.

Reflections on Project TRAIL

My name is Richard Williams and I'm a graduate student in Recreation and Leisure Studies at The University of Georgia. I was the leisure coach who worked with Kyle, a high school student who participated in Project TRAIL. In the time we worked together he really grew in his involvement with leisure activities, particularly art.

Beginning in his junior year in special education at a local high school, Kyle participated in Project TRAIL for two years. His high school teacher identified him as a potential student for our project because he needed leisure skills and exposure to leisure opportunities. When securing permission from Kyle and his mother for his participation, his mother said, "It would be good to get him out doing stuff. He sits in his room all day." So, he became a participant along with seven other students from his high school.

At first, the only thing related to leisure that I could interest Kyle in was art, an interest I happen to share. His mother said, "He loves to draw pictures. He sits in his bedroom every day after school and draws pictures until it's time to eat." So, we began drawing pictures with one another around town at places such as the airport and on the university campus. Weeks later, his mother told me that he spent every afternoon drawing pictures, taking ideas

from library books he brought home. Frequently, a brother or a sister would join him. Kyle's mother was pleased that his siblings had begun to interact more with Kyle. She stated, "His brothers and sister sometimes go in his room and draw with him. They never used to do anything with him, but now they draw pictures together."

I discovered an inclusive art class that welcomed Kyle. For 12 weeks, he learned about clay, pottery, painting, and drama with his peers. When the class had a public showing of their art, all of the teachers came to the consensus that one of Kyle's train paintings should be the sole piece of art included on the invitation. In addition, one of the board members from the center that hosts the art classes owns an art gallery, and has offered to frame several of Kyle's best drawings so that they can be submitted to an art show in Atlanta. She has also offered to find space in a gallery that might present some of Kyle's art for sale. Although Kyle has difficulty expressing his feelings about his leisure pursuits, clearly art has become a creative outlet for him and has provided him with an opportunity to interact with members of his community. As Kyle says, "Art is fun. I have fun drawing."

Now people have begun to treat Kyle like an adult. Kyle is shy and he rarely speaks unless he is asked a direct question. When he does speak he uses few words or brief phrases. Having spent a lifetime having difficulty expressing himself and being heard, Kyle has the opportunity, through art, to express himself in new ways and to share those expressions with a wide range of people. When asked about his feelings regarding his art accomplishments, Kyle responds by saying, "So proud." An exciting aspect of his self-expression is that people seem to like what he has to say. They are as charmed by his drawings as I have been in the hours I have spent getting to know him. His mother has indicated that since Kyle's participation in Project TRAIL, she notices a positive change in family relationships, including a greater show of respect for Kyle by his siblings. Because Kyle is sparing in his words, I felt a great sense of personal satisfaction when he said, "Richard, I like you." A woman who helped with the art classes told me, "If you ever find someone who doesn't think you make a difference, have them meet Kyle."

Contributed by Richard Williams.



Supporting the Whole Person: Southside Services

by Don Magnuson

Southside Services in Minneapolis, Minnesota, provides support to people with developmental disabilities and/or their families so that they can successfully live in the community. The emphasis of the program is – through teaching, modeling, and encouraging – to equip those it serves to do as much as possible for themselves. Southside addresses the needs of the total person through services that include crisis intervention, information and referral, individual counseling, family counseling, group counseling, daily living skills training, academic skills training, advocacy, parenting skills training, chemical dependency counseling, employment assistance, and recreational activities. It is through these that Southside

The agency serves not only recreation, but all aspects of people's lives, making it a one-stop shop for a variety of services.

seeks to promote independence, interdependence, and achievement for those it serves, most of whom are adults who are illiterate, live at the poverty level economically, and have not had their needs met in a typical social service system.

Among the services available is a recreation program that offers several competitive sports teams (basketball, softball, volleyball, and bowling), low-cost camping and fishing trips, and a large variety of social activities (dancing, dining out, spectator sports, day trips, special events). All activities take place in community settings. The recreation program is unusual in several respects:

- All registration is done by phone to eliminate a paperwork load on participants.
- Activities are held weekdays, evenings, and weekends to accommodate those who work second and third shifts and those who are retired.
- Partial transportation is provided free of charge, and the offices are located on major bus lines.
- Many activities are free or offered for a minimal charge.
- Full-time staff do direct hands-on work with participants, rather than delegating that work to part-time employees or volunteers.
- The agency serves not only recreation, but all aspects of people's lives, making it a one-stop shop for a variety of services.

Southside's recreation program seeks to provide opportunities for people to make and maintain friendships, learn

and maintain recreation skills, improve social skills, increase knowledge of community resources, and do things they would not otherwise have the opportunity to do. These goals are accomplished by providing adaptive programming where the demand is greatest and by assisting people in accessing already-existing park and recreation, community education, and other programs.

Southside has chosen to take an approach to recreation that offers people the most choices by accessing both inclusive and adaptive options. It has been interesting to watch the number of inclusive and adaptive programs change in the past 10 years in the Minneapolis - St. Paul area. Rather than one growing at the expense of the other, they both seem to be growing significantly. We believe this is beneficial because it offers people more choices. Many participants in Southside's recreation program move easily between both realms, apparently finding advantages to both approaches. For example, a participant may find that going to a night club with live country music is more enjoyable than a dance for people with developmental disabilities. However, that same person may find that an adaptive softball program fits his or her skill level (and pocketbook) better than a regular softball league sponsored by the city. The key is that they have choices. Our primary consideration when finding recreation services for someone is whether the person will enjoy and benefit from the activity, not whether it is inclusive or adaptive. Southside does not assume that people with disabilities will always prefer one

Southside has chosen to take an approach to recreation that offers people the most choices by accessing both inclusive and adaptive options.

setting over the other, and supports individuals to make their own choices with their leisure time.

The same approach is taken regarding the often-debated issue of cooperative and competitive activities. Rather than pit the two against each other, it is possible to offer both and let the participants decide which they prefer. There are some professionals who have suggested that all competitive sports leagues should be integrated. But when asked, for example, how an individual with severe cognitive and physical impairments would be able to play point guard against a recreation league team of former college basketball players, their response is that the rules and competitive nature of the game should be changed to a cooperative structure in order to accommodate all ability levels. This, of course, is unwork-



able because a large number of people – including people with disabilities – love to compete in various endeavors with people in their own skill range. Competition can be beneficial and enjoyable, if managed in a way that encourages doing one's best and exhibiting fair play and a positive attitude. Obviously, many activities are better suited for a cooperative structure, such as a camping trip. Southside attempts to apply common sense along with responsiveness to participant requests when deciding whether to offer an

activity in a cooperative or competitive setting. Participants in Southside's program value this approach because it gives them the greatest variety of options from which to choose. We believe this contributes to the sense of self-worth and dignity on the part of the people we serve.

Contributed by Don Magnuson, Recreation Specialist with Southside Services, Minneapolis, Minnesota. He may be reached at 612/721-1696.

Bill and Karen: A Family That Plays Together

Hi. My name is Bill. I'm married and live in Minneapolis. I started with Southside because I had been hospitalized for some problems and was feeling pretty hopeless. Some people I lived with hooked me up with Southside and I became involved with the Alcoholics Anonymous (AA) group. I haven't had a drink in 14 years. AA speakers and movies were helpful to me. They talked about the effects of alcohol. Sharing stories with others in the same boat was good.

I've used the AA group, employment, recreation, outreach workers, tax help, counseling, and budgeting services at Southside. It is different from other places because you can get help with many different things. Southside has helped me turn my life around. I

care about myself much more and enjoy life more.

With the recreation program I enjoy movies, camping trips, fishing, softball, bowling, and mini-golf. My favorite camping trip was to the Boundary Waters Canoe Area in northern Minnesota. I had never been there before. The canoeing was fun. The rapids were hard, but we made it through. I once caught a large mouth bass while fishing with Southside. That was the biggest fish I've ever caught. There have also been a lot of bigger fish that got away. I would like to do adult swimming lessons, rock climbing, and archery in the future.

I do things with Southside because they are fun. It has



helped me meet a lot of people that I've become friends with over the years. I get together with these friends a lot on my own. It gives me the chance to meet more new people, too.

I'm Karen. I started with Southside before Bill and I got married because I was Bill's girl-friend and he told me about it. I started with their bowling program and joined softball the following spring. I've done mostly recreation, like movies, the amusement park, camping trips, softball, and bowling. The recreation program helps me get together with other people. Bill and I have met a lot of good friends through Southside.

Southside is different than other places because the door is always open. I mean they are

always friendly and willing to help. Every staff person I've come in contact with has been very nice. Southside is good at giving us ideas of other places to go if they can't help us with something.

We have a lot of fun and enjoy ourselves. Most of us try not to worry about winning or losing. It's nice to have a coach to help us when we have problems. Someday I would like to go to the Wisconsin Dells and Disneyland, and on more camping trips.

Contributed by Don Magnuson. Bill and Karen live in Minneapolis, Minnesota.



Building the Community Membership of Older Adults with Developmental Disabilities

by Barbara Ann Thomas

Many of us know how good it feels to have a sense of belonging and acceptance with family, friends, coworkers, neighbors, and peers. We all know how important these connections are to the quality of our lives. Community membership is taken for granted by many of us because of the consistent opportunities we've had to interact with others and share our abilities and talents. And yet, for a variety of reasons, participation in play, school, work, church, and recreational activities are not always available to older people with developmental disabilities.

The Community Membership Project at the Center for Aging Persons with Developmental Disabilities, Indiana University, is designed to give older people with disabilities opportunities to explore their communities and find a sense of belonging and value. These opportunities are found through part-time work, volunteerism, recreational activities, and attending continuing education classes. Support and assistance are provided in pursuing areas of individual interest, accessing transportation, and developing relationships. Community membership offers individuals with disabilities the opportunity to form relationships that are based on friendship and shared interests rather than payment. The project offers them the chance to be seen as useful, contributing, and valued members of the local community.

To achieve this outcome, a process not unlike the supported employment model is used in which a "community builder" takes on a role similar to that of the job coach. The community builder offers individualized support on location, with the goal of having the person be as independent as possible in chosen community activities. Strengthening social networks is an important focus. Many aging individuals with disabilities have not had a chance to create friendships; their primary social contacts have often been limited to those persons employed as care providers. This project endeavors to move beyond this limited sphere.

The journey toward community membership is not a quick and easy one. It takes time to discover the potential and interests of people who have lived the greater part of a lifetime with low expectations regarding their capacity to make a contribution to their communities. Many older people with disabilities have few or no life experiences that can be used as a basis for knowing and expressing their preferences. For some, verbalizing those preferences may be even more difficult or impossible. It is the job of the community builder to watch and listen carefully in order to get to know the individual well. The challenge of the community builder is to help people with disabilities discover and develop their individuality. Spending time together in a variety of settings

reveals different facets of the individual's personality. The goal is to find environments that bring out the interests, capacities, and talents of each individual. It takes patience to help them discover who they are.

One illustration of the success of this approach can be found in the experience of a man named Joe, with whom I work as a community builder. Joe, who was born with mental retardation, lives in a local nursing home. I have found him, in general, to be more of an observer than a participant. He has limited conversational skills, and his standard answer to everything I ask is either "I can't" or "No, gettin' old, gettin' old." Joe just turned 59, and is at the beginning of his journey to become active in his community

I have discovered that Joe does not like being in close, confined places. At a museum his usual twitches and shaking became very pronounced and he told me he was "nervous." A sharp contrast to that type of environment was the YMCA where I saw a different and quite unexpected Joe emerge. When he spotted the weight room, he walked over to the mirrors, picked up two hand weights, and started lifting them with the biggest grin I have ever seen. Joe now goes to the YMCA once a week and is slowly becoming less dependent on me for direction and companionship. As his comfort and confidence levels increase, he may participate in the Pumping Silver weight lifting class for seniors. One day a week Joe also joins other seniors in an afternoon of Bingo at the Older American's Center. Joe's independence, ability, and willingness to participate are slowly beginning to surface.

This is a brief look into the life of one person who for years had been shut away from the world beyond the walls of the nursing home. His story demonstrates that with patience, support, and experience many older people with developmental disabilities can become active members of society. This journey is not quick and easy. It takes time to help people discover their own identities. In many cases, we still have a long way to go. But, we have to remember that even these small accomplishments are huge successes, and that eventually they will contribute to helping Joe and others to become accepted by and supported in their local communities.

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Resources

The following resources may be of use to parents and professionals in planning for inclusive recreation. Please contact the distributors for information about costs and ordering materials.

- Friendships and Community Connections Between People With and Without Developmental Disabilities (1993). By A. Amado. A resource for supporting friendships and full community participation through the use of natural social connections. This book explores various dimensions of friendship including work and leisure relationships; gender-related expectations; community associations and groups; and the roles of love, affection, and intimacy. Available from Paul H. Brookes Publishing Company, Baltimore, Maryland 800/638-3775.
- Making Friends: Using Recreation Activities to Promote Friendship Between Children With and Without Disabilities (1993). By L. Heyne, S. Schleien, and L. McAvoy. A handbook that assists parents, community recreation staff, and teachers to support friendships between children with and without disabilities, grades K-6. Discusses what friendships mean for children, barriers to friendship development, and strategies for encouraging friendships through recreation activities and home-school-community collaboration. Available from the Institute on Community Integration, University of Minnesota, Minneapolis 612/624-4512.
- A Teacher's Guide to Including Students with Disabilities in Regular Physical Education (1994). By M. Block. A practical reference for regular education teachers and adapted physical education specialists to meaningfully include children with disabilities in regular physical education programs. Includes examples, detailed assessment guidelines, suggestions for environmental and activity modifications, and a discussion of inclusion issues and challenges. Available from Paul H. Brookes Publishing Company, Baltimore, Maryland 800/638-3775.
- Powerful Partnerships: Parents and Professionals
 Building Inclusive Recreation Programs Together
 (1995). By S. Schleien, J. Rynders, L. Heyne, and C.
 Tabourne (Eds.). A compilation of writings by 22 authors
 – including parents and professionals on the history of
 inclusive recreation, strategies for enhancing family and
 community development through inclusive recreation, and
 successful programs incorporating different inclusive
 recreation approaches. Available from the Institute on
 Community Integration, University of Minnesota, Minneapolis 612/624-4512.
- Lifelong Leisure Skills and Lifestyles for Persons with Developmental Disabilities (1995). By S. Schleien, L.

- Meyer, L. Heyne, and B. Brandt. A resource for parents, teachers, and recreation professionals to help people with disabilities learn essential lifelong leisure skills. Provides guidelines for setting instructional objectives, selecting age-appropriate activities, promoting skill acquisition, adapting activities, encouraging choice-making, collaborating with families, and promoting community recreation participation. Available from Paul H. Brookes Publishing Company, Baltimore, Maryland 800/638-3775.
- Community Recreation and People with Disabilities: Strategies for Inclusion (1996). By S. Schleien, M. Ray, and R. Green. A step-by-step resource for ensuring the inclusion of people with disabilities in community recreation programs. Chapters address creating inclusive environments; overcoming barriers to inclusive recreation; building bridges between families and agency staff; assessing leisure interests; evaluating environments and accessibility; and designing, implementing, and evaluating recreation programs. Includes a comprehensive annotated bibliography. Available from Paul H. Brookes Publishing Company, Baltimore, Maryland 800/638-3775.
- School-Community Leisure Link: Leisure Education Program Curriculum Guide (1992). By C. Bullock. L. Morris, M. Mahon, and B. Jones. A leisure education curriculum for elementary through senior high school students that is designed to be implemented across school, family, and community settings. Units include leisure awareness, leisure resources, leisure communication skills, independent decision making, leisure planning, and activity skill instruction. Available from the Center for Recreation and Disabilities Studies, University of North Carolina, Chapel Hill 919/962-0534.
- Project TRAIL Publications. A number of publications are available, including Leisure Education Self-Contained Instructional Packages for People with Cognitive Impairments, a manual for use in creating educational board games that can be used with persons with developmental disabilities in leisure education programs; Community Support Through Leisure Coaching, a guide to ways that family, friends, and community volunteers can assist a person with developmental disabilities in leisure pursuits; and publications on how to develop a detailed leisure education curriculum for persons with developmental disabilities. Available from Project TRAIL, The University of Georgia, Athens: 706/542-5064.



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survive and thrive again as an active teenager who will succeed in all aspects of life.

Teenagers' lives are very social. They talk, talk to each other on the phone, at school, at the game, in the park, and around the neighborhood. They are learning to make decisions, be responsible, and develop friendships with people outside of their families. How do they do this? In part, through participation in recreation experiences with their friends. They ride bikes, play street hockey, swim at the beach, tube down the river, go to amusement parks, play sports, shop at the mall or hang out at the park. Kids with disabilities need these same opportunities to grow and develop and have fun just like their peers who don't have disabilities. But for Erin and many other kids like her, this is not always how their leisure happens. After Erin had the strokes, her friends disappeared. They didn't understand what had happened or know how to accept her differences: the physical changes, communication difficulties, and limitations in learning and understanding. Erin has had to re-learn how to play, build relationships, chat with friends, and be independent, safe, and responsible. This does not happen during the structured time at school or within the confines of family leisure. It has to happen in typical free time with typical kids in typical recreation environments. How can we, as parents of kids with disabilities, help them accomplish this? "Just do it," to coin a phrase from Nike, a leader in the recreation industry. We give our children the opportunities to do what everybody else is doing. If their friends play street hockey, then we can figure out how our child can do it. We can teach others that our child has "ability" and that it's okay to do things differently. We need to believe in the significant value of being there and hearing, seeing, tasting, feeling, and experiencing any recreation activity.

Kids learn best from other kids. We need to give our children the opportunity to interact with kids who have welldeveloped knowledge, skills, and abilities so our children can see what other kids do and how they do it. Erin improved her swimming abilities by being on the summer swim team. She learned all kinds of strategies from the coach and other kids, and was encouraged and supported as a valuable member of the team. She began the season swimming only exhibition races, but late in the summer she swam in a relay and one individual event and placed in both. Those ribbons made such a difference in her self-confidence and demonstrated to the other swimmers that she does have ability. She now talks about training for the Paralympics (for athletes with physical disabilities) in 2000 in Australia by joining her high school swim team. Swimming with one arm and one leg, she knows she will not be competitive with swimmers who use both arms and both legs, but she also knows that she can train with and learn from her peers.

We can also help others recognize and remove barriers to recreation participation by pointing out what gets in the way. Sometimes it is simply the environment that is unfriendly at the park, playground or beach. Most often the barriers are not the result of intentional discrimination, but of not knowing. Our community built a beautiful playground at the park near our house the summer before Erin acquired her disability. We all volunteered for many days, but it was Erin who worked the most, caring for the children of the other families working to create a safe and fun playground for our children. Venturing to the playground for the first time with Erin in her wheelchair, we encountered several obstacles: A bridge that was too narrow over the creek that separates our neighborhood from the park, and a wooden barrier that keeps the inaccessible sand in and around all the fun things to do. Neither was built to keep Erin out intentionally. We are now working with the county parks to identify other such barriers and suggesting user-friendly solutions to these things that get in the way for Erin and other young people with disabilities.

We believe that *all* children have ability and the right to participate in any and all recreation experiences. Please join us and sign them up, get them registered, take that first step toward inclusive recreation. I hear often from recreation providers that they don't know who we are or what our desires are for our sons and daughters. Let's let them know. The move to inclusion is an evolutionary process. Let's let them know how to welcome and invite our children, how to adjust their attitudes so our children's participation is valued and not feared, how to remove barriers, and how to provide individual supports and accommodations so our children and our families enjoy a rich leisure lifestyle in our communities with our friends.

Cynthia Kay Burkhour is an Inclusive Recreation Consultant in Jenison, Michigan. She may be reached at (616) 669-9109.

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While engaging in gardening, travel, and other similar endeavors, people meet others with matching interests on a "level playing field," sharing a camaraderie that transcends differences and celebrates similarities.

■ Later Adulthood

Younger senior adults routinely renew activities and enjoy playing them again with people who are much younger, perhaps with children. As these adults think about what constitutes meaningful leisure, preferred activities of the past can be modified or experienced in a new way. They may also try new activities that were only dreamed about in younger years. A spiritual dimension (leisure=peace) of leisure is associated with this stage. As elders age, the types of recreation activities they select are often determined, at least in part, by factors over which they have limited control, such as



stamina and physical access to opportunities in the community. Play is, at this stage, an important strategy for adjusting to biological and environmental changes, and may be the key to retaining some sense of personal control and remaining a vital, contributing member of society. Leisure may take on a sense of urgency and heightened value as participation in activities become necessary for healthy aging. The therapeutic aspects of the activities become paramount in retaining cognitive and psychosocial skills, and motor abilities.

At this later stage of life, it is likely that all persons will become increasingly less able to perform certain tasks without some assistance. To the extent that persons with disabilities required assistance in earlier years, they often need additional help to participate in recreation activities in later years.

■ Conclusion

Parents who possess knowledge about the need for leisure at all stages of life, and understand the benefits of playfulness and of skill development through recreation activities, can make sure that these important dimensions of life are not overlooked, particularly as their children reach teen and young adult years. To set a good example, to reinforce healthful behaviors, and to increase their son's and daughter's independence, parents can incorporate leisure into the family's daily life. Good habits grow over time and are then practiced across the life span.

Carla E.S. Tabourne is Associate Professor in the Division of Recreation, Park, and Leisure Studies, University of Minnesota, Minneapolis. Jerry G. Dickason is Professor in the Department of Health Professions, Physical Education, Recreation and Leisure Studies, Montclair State University, Upper Montclair, New Jersey. For further information contact Carla E.S. Tabourne at 612/625-7590.

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Technical assistance was provided by the certified therapeutic recreation specialists to help the partners implement inclusion in their agencies. Technical assistance was as varied as the unique needs each partnership posed. Examples of assistance included the following:

- Staff training on disability awareness and inclusion to YMCA summer camp staff.
- Assistance to a parent advocacy group to plan, implement, and evaluate a friendship/inclusion program.
- Review and revision of a park district's spring/summer schedule and registration form to be more inclusive.
- Disability awareness training to a church youth group.
- Provision of leisure education to people with disabilities

living in group homes, with a focus on how to access community recreation services.

- Training for peer advocates in a gymnastics program to facilitate inclusion of children with disabilities.
- Assistance with development of a before- and after-school program that is inclusive of *all* children.
- Assistance with development of a position for an inclusion coordinator to be shared by four agencies.
- Accessibility survey and transition plan for Girl Scout camp.

In addition, technical assistance has included the development and use of an adaptive recreation equipment loan library, and provision of staff training, needs assessments, and other supports for agencies. Project staff have worked from an agency level to an individual level, helping children and adults with disabilities and their families be included in the recreation activities of their choice in their communities.

Through the RRIP, we have raised the awareness and skills of recreation providers across the state of North Dakota on how to better serve people with disabilities in their own communities. The 200-plus participants who completed the formal training with the project showed a significant increase in positive attitudes toward people with disabilities and in their knowledge of inclusion strategies. The majority of the training participants implemented inclusion at their agencies, working in partnerships to better utilize expertise and resources. Mary Jo's story is just one example of the impact the project has had on individual lives (see accompanying article). In addition, some systems change is beginning to occur. For example, most larger park districts across the state have revised their mission statements, agency literature, and registration processes to be more inclusive and welcoming to people with disabilities. Some communities have formed access advisory groups to work on community recreation issues. Partnerships have been formed between disability advocacy groups and park groups.

The Rural Recreation Integration Project can be thought of as a pebble thrown in the water, with ripples spreading across the state. The project has raised awareness and increased opportunities for people with disabilities to be a part of inclusive recreation services. The challenge now is to keep those ripples moving.

Lynn Anderson is Associate Professor with the Department of Health, Physical Education and Recreation, University of North Dakota, Grand Forks. Carla Brown and Patricia Soli are Recreation Specialists with the North Dakota Parks and Recreation Department, Grand Forks and Bismarck, respectively. For more information on the RRIP, contact Lynn Anderson at 701/777-2978.

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